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ABSTRACT

This study compared differences between resident assistants (RAs) and conduct code violators in alcohol and drug knowledge, reported use, and perceptions of reasons for abuse and role of the institution. Twenty conduct code violators participated in an alcohol and drug education program and 35 RAs participated in an abbreviated program as part of their job training. The setting for this program was a state college in Oregon with an enrollment of about 4,000 students of whom 800 lived on campus. All subjects completed the Alcohol: Facts vs. Myths test and the Drug and Alcohol Usage/Awareness Assessment. The results showed that RAs were generally more knowledgeable about alcohol facts than were conduct code violators. Respondents showed some knowledge of alcohol, especially in the areas of its classification as a depressant, behaviors of intoxication, and overdose dangers. Both groups seemed less aware of alcohol's impact upon society and appeared misinformed about alcohol's effects on the body. RAs appeared effective in identifying students who abused alcohol or drugs. RAs differed strongly from violators when describing reasons for abuse of alcohol or drugs, and suggestions for the role of the institution and its representatives. These findings suggest that RAs may not have a clear understanding of the conduct code violators. Evaluations from the program suggest that college alcohol and drug programs should include appropriate components on effects and dangers of drugs, and on family influence, and should be conducted in a non-judgmental atmosphere. (NB)

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# College Students vs. RAs:
# A Programmatic Comparison
# of Ideas About Alcohol and Drugs

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Running head: COLLEGE STUDENTS VS. RAs/IDEAS ABOUT ALCOHOL AND DRUGS

Abstract

This article investigates possible effective components of college alcohol and drug education/ awareness programs and draws comparisons for alcohol and drug knowledge, use, and perceptions between Resident Assistants and residential students. Some suggestions are then offered.

In its November 9, 1988, edition, the Chronicle of Higher Education reported survey results and expert opinions regarding alcohol-related problems on campuses. Many of those campuses surveyed reported that they provided alcohol prevention and education programs in response to evidence that alcohol was involved in campus problems with increasing frequency. However, experts reported little available guidance to counselors and administrators about meaningful content for these programs. Geraldo Gonzalez, Associate Professor of Counseling at the University of Florida, indicates that we are throwing millions of dollars away on good faith efforts and programs that we think work. Little feedback from program participants seems to be available on what actually works and under what circumstances. The present study addresses the issue of "what do the students attending such programs think can work."

The authors structured and delivered a drug and alcohol education/awareness program for residential students who violated the college conduct code when alcohol and drugs were involved. During the program, these students gave their reasons for alcohol and drug abuse and their opinions for a more positive role of the college in conducting intervention programs. The program also was presented as a training component for students serving as assistants and managers in the residence life division. The college setting for this program was a state college in Oregon with an enrollment of approximately 4,000 students; about 800 students live on campus.

As the RAs are the enforcers of drug and alcohol policies, the authors felt it was important to investigate the similarities of perceptions between the RAs and the conduct code violators. It was hypothesized that the RAs may not have an appropriate understanding of the policy violators, and therefore may react in judgmental ways.

Therefore, the purpose of this study was 1) to compare differences in responses of RAs and conduct code violators in alcohol and drug knowledge, reported use, and perceptions of reasons for abuse and role of the institution in terms of abuse, and 2) to gain insight on effective components to a college alcohol and drug education/awareness program.

## Description of the Program and Methodology

Twenty conduct code violators participated in the program during the 1988-89 academic year in groups of four participants and paid a $25 fee at the first of the sessions. The groups were facilitated by one of the authors who was a counselor in the college counseling center. The content of the program included drug classifications, physical and psychological effects, factors contributing to chronic use, definitions of dependency and addiction, family influence, and getting help. Information was gathered during the program concerning students' knowledge of alcohol, use of alcohol and drugs, stated reasons for alcohol and drug use/abuse, and opinions about an appropriate role of the institution. The length of the program was 4.5 hours. For each group of four participants, the program was usually conducted in two separate sessions over a one-week period. Discussion about self in relation to content was encouraged.

Thirty five Resident Assistants experienced an abbreviated program (2 hours) as part of their job training. Responses from the conduct code violator groups and the RA group were compared. The average age for conduct code violators was 19, and the average age for the RAs was 21. Descriptive statistics were used in this study, including means, percents, and frequencies.

## Results

Instruments used for comparison included the Alcohol: Facts vs. Myths test (Gardner & Jewler, 1985) and the Drug and Alcohol Usage/Awareness Assessment (Ellis, 1985).

Results showed that Resident Assistants were generally more knowledgeable about alcohol facts than were the conduct code violators. The RA group missed 23% of the responses as compared to 32% missed by the mandated students. The questions most often missed by both groups were in relation to the amount of money Americans spend on alcohol as compared to education (Item 8), time taken for a larger person compared to a smaller person to sober up (Item 11), and estimation of teens annually killed in drunk driving accidents (Item 4). The questions least often missed by both groups pertained to alcohol overdose (Item 14) and lack of inhibition when drinking (Item 1).

The results also showed that few students from either group believed alcohol was a stimulant (Item 3), and few believed black coffee, walking, or cold showers would sober up someone who was drunk faster (Item 10). These findings are similar to results of Engs & Hanson's (1989) recent national college student survey, although a somewhat different questionnaire was used in that study.

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Insert Table 1

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Concerning the drug and alcohol usage/awareness assessment, the conduct code violator and RA groups were compared concerning their alcohol and drug usage. The conduct code violators scored much higher, with a mean score of 7.2, compared to 3.4 for the RA group. (A score of above 5.0 indicates that alcohol and/or drugs are having adverse effects on the person's life (Ellis, 1985). The conduct code violator groups answered "yes" most often to using alcohol or drugs to escape lows rather than produce highs (Item 5), having parties that almost always include alcohol or drugs (Item 10), experiencing blackouts (Item 27), and hiding drinking behavior (Item 4). All of these items relate to early signs of progressive use and abuse. The RA group answered "yes" most often to hiding drinking behavior (Item 4).

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Insert Table 2

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When asked about reasons for abusing alcohol and drugs, the conduct code violator groups suggested tradition, availability, glamor, and wanting to rebel as their major reasons. In contrast, the RA group saw no personal abuse on their part, and therefore suggested the major reasons others abuse alcohol and drugs were due to peer pressure and wanting to relax.

When asked how the college could help deal with the problems of student alcohol and drug abuse, the conduct code violators indicated that the institution should make consequences to violating campus policy as clear, consistent, and fair as possible. They also suggested that the

institution's representatives take a non-judgmental position when enforcing policy. The RA group answered quite differently, and suggested a freshman required course that includes alcohol and drug education in its content, and good role modeling.

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Insert Table 3

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The conduct code violator groups also completed a program evaluation form and indicated that they learned the most from content about the effects of alcohol and drugs and why some are more dangerous than others, and discussion about family history and its impact on behavior. These students also noted high satisfaction with the way their points of view were addressed, and with the lack of "non-preaching" approach to the program.

Even though the students were generally pleased with the program, many participants indicated that they wished the program had not been condensed into such a short time period.

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Insert Table 4

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## Discussion

Generally, the students in this study have some knowledge of alcohol, especially in the areas of its classification as a depressant, behaviors of intoxication, and overdose dangers. Yet, both the conduct code violators and the RAs seem less aware of alcohol's impact upon society, as exemplified in their inaccurate perceptions of costs compared to education and death rate for teens. Both groups also seem to be misinformed in terms of alcohol's effects on the body concerning the sobering up process.

Evidently, the RAs were effective in identifying students that tend to abuse alcohol and/or drugs as indicated by the noticeably high scores by conduct code violators on the Usage Assessment. Both groups did note that they tended to hide drinking from others. This

could possibly be explained by the fact that many of these students were under the legal age for drinking alcohol.

This study seems to indicate that the RAs may not have a clear understanding of the conduct code violators. The RAs apparently differed strongly from the conduct code violators when describing reasons for abuse of alcohol and/or drugs, and suggestions for the role of the institution and its representatives. The conduct code violators also implied that the RAs were somewhat judgmental, and possibly inconsistent, in their interactions.

From this study's results, it is suggested that RAs should strive to become less judgmental toward those who use alcohol and drugs more than they do, and more consistent in enforcing policy concerning alcohol and drug use and abuse. Less judgmental attitudes by RAs could possibly develop from a greater understanding of family background and its impact. This may require additional training.

Evaluations from the program suggest that college alcohol and drug programs should include appropriate components on effects and dangers of drugs, and family influence. These programs should also be conducted in a non-judgmental atmosphere. Based on this study, two components of a program that may need to be addressed in greater depth are the aspects and signs of progressive alcohol and/or drug abuse and the impact of alcohol upon society. Programs could also be expanded to include more than 4.5 contact hours.

In a follow-up survey it was found that there were no repeat violators of the alcohol and drug conduct policy by the residential students in the six months after participation in the program. However, it is not known whether the program was a major factor in this outcome.

References

Ellis, D. B. (1985). Becoming a master student. Rapid City: College Survival.

Engs, R. C., & Hanson, D. J. (1989). "The alcohol knowledge and drinking myths of a national sample of university students." Journal of College Student Development, 30, 180-182.

Gardner, J. N., & Jewler, A. J. (1985). College is only the beginning. Belmont: Wadsworth.

Table 1

Alcohol: Facts vs. Myths (Gardner & Jewler, 1985)*

\+ 1. People do things when they are drunk that they would never do when sober. True or False?

2. About what percentage of adults in America drinks alcoholic beverages?
   a. 95 percent  b. 70 percent  c. 50 percent  d. 33 percent

3. Alcohol is a stimulant. True or False?

x 4. Fifteen percent of all people killed in drunk driving accidents are in their teens. True or False?

5. How many alcoholics are estimated to be in the United States?
   a. 5,000,000  b. 5-6 million  c. 9-10 million  d. 15 million

6. Most people can judge when they are too drunk to drive. True or False?

7. In most states, the blood-alcohol level at which you are legally drunk is:
   a. 0.05  b. 0.10  c. 0.12  d. 0.15

x 8. Americans spend as much on alcohol as they do on education. True or False?

9. Best estimates indicate that _____ percent of all highway fatalities are alcohol related.
   a. 80 percent  b. 25 percent  c. 50 percent  d. 60 percent

10. Black coffee, "walking," or cold showers will sober a drunk up faster. True or False?

x 11. A large person will sober up more quickly than a small person. True or False?

12. Alcohol is an aphrodisiac. True or False?

13. Which has the greatest amount of alcohol in it?
   a. one drink mixed with 80-proof liquor
   b. one 4-ounce glass of 12 percent wine
   c. one 12-ounce beer
   d. all have the same amount

\+ 14. A person may overdose on alcohol just as with other drugs. True or False?

*Correct answers are underlined.

(table continues)

| | Average # of Questions Missed | | (X) Questions Missed Most Often by Both Groups | (+) Questions Missed Lease Often by Both Groups |
|---|---|---|---|---|
| RA Group (N=35) | 3.2 | (23%) | | |
| Conduct Code Violator Groups (N=20) | 4.5 | (32%) | #4, 8, 11 (Frequency ≥ 10) | #1, 14 (Frequency ≤ 1) |

Table 2

Drug and Alcohol Usage/Awareness Assessment*
from Becoming a Master Student
Ellis, 1985, page 242.

YES or NO

1. ____ Are you uncomfortable discussing drug abuse or alcoholism?
2. ____ Are you worried about your drug or alcohol use?
3. ____ Are any of your friends worried about your drug or alcohol use?
4. __X__ Have you ever hidden from a friend, spouse, employer, or co-worker the fact that you were drinking? (Pretended you were sober? Covered up alcohol breath?)
5. __X__ Do you sometimes use alcohol or drugs to escape lows rather than produce highs?
6. ____ Have you ever gotten angry when confronted about your use?
7. ____ Do you brag about how much you consume? "I drank him under the table."
8. ____ Do you drink or do drugs when you are alone?
9. ____ Do you store up alcohol, drugs, cigarettes, or caffeine (in coffee or pop) so you're sure you won't run out?
10. __X__ Does having a party almost always include alcohol or drugs?
11. __X__ Do you try to control your drinking so that it won't be a problem? ("I only drink on weekends now," "I never drink before 5 p.m.," "I only drink beer.")
12. ____ Do you often explain to other people why you are drinking? ("It's my birthday," "It's my friend's birthday," "It's Veteran's Day," "It sure is a hot day.")
13. ____ Have you changed your friends to accommodate your drinking? ("She's OK, but she isn't excited about getting high.")
14. ____ Has your behavior changed in the last several months? (Grades down? Lack of interest in a hobby? Change of values or what you think is moral?)
15. ____ Do you drink to relieve tension? (What a day! I need a drink.")

*A score of 5 or more "yeses" indicates that drinking and/or drugs are adversely affecting a person's life.
**(Fequency ≥ 10)**

16. ____ Do you have medical problems that could be related to drinking? (stomach trouble, malnutrition, liver problems, anemia)
17. ____ Have you ever decided to quit drugs or alcohol and then changed your mind?
18. ____ Have you been high in the morning during the last year?
19. ____ Have you had any fights, accidents, or similar incidents related to drinking or drugs in the last year?
20. ____ Has your drinking or drug use ever caused a problem at home?
21. ____ Do you envy people who go overboard with alcohol or drugs?
22. ____ Have you ever told yourself you can quit at any time?
23. ____ Have you ever been in trouble with the police after or while you were drinking?
24. ____ Have you ever missed school or work because of alcohol or drugs?
25. ____ Do you feel uncomfortable at a party if you don't drink or get high?
26. ____ Have you ever done badly on a test because you had a hangover?
27. __X__ Have you ever had a blackout (a period you can't remember) after drinking?
28. ____ Do you wish that people would mind their own business when it comes to your use of alcohol or drugs?

| | Average Score | "Yes" most often |
|---|---|---|
| RA Group (N=35) | +3.4 | #4 |
| Conduct Code Groups (N=20) | +7.2 | #4, 5, 10, 11, 27 |

Table 3

Most Often Stated Reasons for Alcohol and Drug Abuse*

| RA Group (N=35) | Conduct Code Violator Groups (N=20) |
|---|---|
| -Peer pressure | -Rebellion against a repressive culture |
| -A way to relax | -Glamor |
| | -Availability |
| | -Tradition |

Most Often Stated Suggestions for the Role of the Institution and its Representatives in Reducing Alcohol and Drug Abuse*

| RA Group (N=35) | Conduct Code Violator Groups (N=20) |
|---|---|
| -Freshman required course | -Make consequences fair, direct, and clear |
| -Good modeling | -Don't judge |

* (Frequency of responses were $\geq 10$)

Table 4

Conduct Code Violators Program (N=20)

Evaluation Responses (Frequency ≥ 7)

What did you learn the most from the program content? (most frequent responses)

Informative
Hand-outs/tests/statistics
Great current information, got to the heart of problems and why
Participation
The openness, the examples, the reality we were dealing with
Instructor presented the information in a way that was understandable
**The effects of drugs and why some are more dangerous than others
Taught on a level that was understood by a fairly unknowledgeable person
**Discussion about family history and its impact
**Student's points of view were addressed, no preaching

(**Top three responses, Frequency ≥ 10)

What didn't you like about the program content? (most frequent responses)

There was quite a bit of information jammed into a short amount of time.

END

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